

## SPONSORSHIP REQUEST FINAL REPORT

## **Agency Information**

Name of Agency: _		
Contact Person: _		Title:
Address: _		
City/State/Zip Code: _		E-mail (optional):
Phone:	Fax:	
Event Information		
Event Date(s):		Event Location:
Name of Event and Age	ncy/Organization Host:	
Theme or purpose of eve	ent:	
Event Report (Due within 30 days after the date of the event)		
Date Event activities concluded:		
2. Number of participar	nts:	
3. Description of any follow-up (i.e. ideas that will be implemented as a result of the event)		

- 4. Attach final budget, showing:
  - a. Total expenditures (site rental costs, promotion/mailing, material costs, and other costs)
  - b. Total amount of revenue received for the event from all sources (including Commission funds), and their origin
  - c. Statement of how any excess revenues will be used, set-aside, or returned to First 5 Inyo
- 5. Attach results from any satisfaction surveys (or summarize).